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INTERAGENCY BIOGRAPHICAL AND FINANCIAL REPORT

Public reporting burden for this collection of information is estimated to average 2 hours for biographical information and 2 hours for financial information. This estimate includes time to gather and maintain data in the required form, to review instructions, and to complete the information collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, NW, Washington, DC 20429; Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; Licensing Policy and Systems Division, Comptroller of the Currency, 250 E Street, S.W., Washington, DC 20219; or Corporate Activities Division, Office of Thrift Supervision, 1700 G Street, N.W., Washington, DC 20552; and to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20503.

An organization or a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

GENERAL INFORMATION AND INSTRUCTIONS

This *Interagency Biographical and Financial Report* (report) is used by **individuals**¹ in conjunction with other corporate filings to the appropriate regulatory agency. This report is <u>not</u> a stand alone document.

Preparation

Use of this report is not mandatory. Alternative formats, if used, however, must provide all requested information, including the certification of correctness. All questions must be answered with complete and accurate information that is subject to verification. If the answer is "none," "not applicable," or "unknown," so state. Answers of "unknown" should be explained. The questions are not intended to duplicate information supplied on another form or in an exhibit; a cross reference to the information is acceptable. If this report is used, questions should be answered in the space provided. Use additional sheets as necessary. Each regulatory agency will provide additional instructions for use and preparation. If the report is not complete, the regulatory agency may either request additional information or return the filing. If you are a foreign national or a United States citizen who currently resides in a foreign country, additional information will be necessary.

Financial statements from individuals must be submitted as of a date not more than 90 days prior to the date the financial report is submitted. All amounts in this report must be based on current market value in United States dollars, rounded to the nearest thousand dollars, and agree with any totals in the supplementary schedules. In addition to the sample financial schedules, you may wish to provide supplementary schedules for other items on the financial statement. If the sample financial statement is used, an answer is required to each item. If the filer chooses to use another format, the information filed must be responsive to each request for information contained in the sample format. In addition, each regulatory agency specifically reserves the right to require up to five years of financial data from any acquiring person as well as the filing of additional information and/or statements, such as a Federal income tax return or a current appraisal to support an asset's value.

If a filer has been convicted of any criminal offense involving dishonesty, breach of trust, or money laundering, or has agreed to enter into a pretrial diversion or similar program in connection with a prosecution of such offense (12 U.S.C. § 1829), the filer must obtain approval from the FDIC before being employed in or being an affiliated party with a depository institution.

Each filer must report promptly any material change in the biographical report and/or financial condition that occurs during the review period for this filing. For additional information regarding the processing procedures and guidelines and any supplemental information that may be required, please refer to the appropriate regulatory agency's procedural guidelines (i.e., the FRB's <u>Processing Applications Through the Federal Reserve System</u> and the <u>Applications Procedures</u> Manual, Comptroller's Corporate Manual, the FDIC's Rules and Regulations (12 C.F.R. § 303), or OTS' Application

A **company** seeking to directly or indirectly acquire control of a bank or thrift should consult with the appropriate regulatory agency for filing instructions.

Processing Handbook) or contact the agency directly for specific instruction.

Confidentiality

In general, requests for confidential treatment of specific portions of the application must be submitted in writing concurrently with the submission of the application and must discuss the justification for the requested treatment. Applicant's reasons for requesting confidentiality should specifically demonstrate the harm (e.g., to its competitive position, invasion of privacy) that would result from public release of information (5 U.S.C. 552). Information for which confidential treatment is requested should be (1) specifically identified in the public portion of the application (by reference to the confidential section); (2) separately bound; and (3) labeled "Confidential." Applicant should follow the same procedure regarding a request for confidential treatment with regard to the subsequent filing of supplemental information to the application.

An Applicant should contact the appropriate regulatory agency for specific instructions regarding requests for confidential treatment. The appropriate regulatory agency will determine whether the information submitted as confidential will be so regarded and will advise the Applicant of any decision to make available to the public information labeled as "Confidential."

INTERAGENCY BIOGRAPHICAL AND FINANCIAL REPORT

This is filed with respect to:

		Na	ame of Subj	ect Institution	or Holding Company	y, Location	1
		Тур	e of Filing		Posit	ion	
	□ Bank/T □ Change □ Change □ Citizens □ Charter □ Deposit □ Federal	hrift Charter hrift Holding Control in Bank Control in Senior Execution ship Waiver Conversion t Insurance Branch or Age	rol cutive Office ency		☐ Organizer ☐ Director ☐ Senior Exe ☐ Principal S ☐ Trustee ☐ Manager ☐ Other	hareholdei	·
				BIOGRAPH	IICAL REPORT		
1.]	Personal Inf	ormation					
(a)	Name	(Last)	(First)	(N	Middleno initials)		
(b)	Residence						
(0)	residence				et Address)		
		(City)		(S	tate)	(Zip Co	ode)
(c)	If at residence less than five years, list addresses and dates occupied for past five years.						
	Date From	Date To Nun	nber and Str	<u>eet</u>	<u>City</u>	State	Zip Code
(d)	Date of birth	(Month)	(Day)	(Year)	_		
(e)	Place of birt	th		(State)	(Country)		
(f)	Social Secur	•		, ,			
(g)	Citizenship(Country)						
\0/				(Date, if Na	aturalized)	-	
(h)	(h) If not a U.S. citizen, Passport No Home Country ID No Father's name and Mother's maiden name: Immigration File No						

(i)	Telephone and fax n	numbers where you	nay be reached d	uring business hou	irs:
	(Area Code)(Teleph	one Number)		(Fax N	umber)
(j)	Trade names and/or	other names used in	n place of given n	ame and period of	and reason for use.
	<u>Name</u>	Period of Us	<u>e</u>	Reason for Use	
2.	Employment Record	I			
(a)	List employment in	reverse chronologic	al order for the la	st five years.	
Dat Fro		Location (City, Stature of Business	e)	Position Held/ Nature of Duties	Reason for Leaving
(b)	Have you ever been discharge from milit If "yes," complete the Employer's Name/Address/Telephone	ary service?	d to resign from Position	any past employr Date of Discharge	nent, including a less than honorable □ Yes □ No Explanation
	Education and Profe				
					chools, and (b) professional license or CPA, NASD or SEC registration).
(a)	School's Name/Loca	<u>ation</u>	<u>From</u>	<u>To</u>	<u>Degree</u>
(b)	<u>License</u>	Issuing Authority		Date Issued	Expiration

	Business and Banking List any businesses (c		int venture, trustee) with wh	nich you are associ	ated.	
_	Business Name/ Location	Nature of Business	Position/ Relationship	Percent Ownership	From	
(b)		itutions with which you are ip or more of any class of s	or have been associated as a tock).	an officer, director	, partner, tr	ustee, or
Fi:	nancial Institution/ Location	Nature of Business	Position/ Relationship	Percent Ownership	<u>From</u>	<u>To</u>
(c)		eks Act (DIMIA)(12 U.S.O	nanagement official," as do C. §§ 3201-3208), of anot	her insured depos		
	If "yes," explain eithe prevent a violation of		k is not a violation of the D	IMIA, or what act	ion will be	taken to
(d)	Are you in the process agency?	s of being considered for a s	enior executive officer or di	rector position by	any other re □ Yes	egulatory No
	If "yes," provide the r	name of the agency and the	institution or holding comp	oany.		

5. Legal and Related Matters

(If "yes" is answered to any item in (a) - (e) below, describe the situation in detail, including the name and location of the institution, business, or parties involved, the date(s), nature of the charge/association/proceeding, name and address of court involved, and the disposition.)

(a) Have you ever been the subject, in your individual or corporate capacity, of a prior or current application or notice that was filed in final form and subsequently denied, withdrawn, or otherwise failed to obtain favorable action, or other regulatory matter and/or administrative action pertaining to any federal or state financial institution?

\[
\textsq\ \text{Yes} \quad \text{No} \]

(b)	the outstand subject to an	ling stock) with an	y insured depository institution or have you been personaction?	ution or finar	icial institution l	nolding company	that has been , civil money
(c)	institution, institution of Insurance C	as defined in 12 U depository agency	senior executive officer, J.S.C. § 1813(c), that: (1 (e.g., FDIC, Resolution) was a merger partner wy agency?) failed, (2) : Trust Corpo	received finance ration, or form	ial assistance from er Federal Saving	n a financial gs and Loan tance from a
(d)	examination issued again in or resulte undertaking	n, or administrative ast, entered into by, ed in any sanction, s, consents or orde	I, or are you currently in e proceeding (excluding re or involving you or a con fine, monetary damage, ers with any federal or state al, or foreign government	outine or cust npany with w loss of right e court, any o	tomary audits, in hich you are or or benefit, revo	nspections, and in were associated th cation of license,	vestigations) at may result agreements, n of the U.S.
(e)		fficer, director, or	enterprise with which yo principal shareholder of				ankruptcy or
(f)			personal loan, loan to your uding direct and indirect				
(g)	executive of of any law	fficer, director or p enforcement age y expunged, or ha	enterprise with which yo rincipal shareholder (own ncy's charge, arrest, indi ave you pleaded <i>nolo con</i>	ing 10% or n ctment, con	nore of the outsta	anding stock), bee ion whereby the	n the subject record was minor traffic
	If "yes," con	mplete the followi	ng:				
	me/Type <u>Business</u>	Relationship/ Stock Owned	Nature of <u>Charge/Proceeding</u>	Date of Charge	Jurisdiction Location	<u>Disposition</u>	<u>Date</u>

6. Additional Information

Present any other information you believe is important to evaluate your filing. If you are involved in the organization of a new institution, discuss your specific role.

FINANCIAL REPORT

FINANCIAL STATEMENT AS OF	
(in thou	isands)

Assets		Liabilities and Net Worth	
Cash on hand and in financial institutions Marketable securities (Schedule A)	\$	8. Accounts payable9. Notes payable and other loans (Schedule F)10. Real estate mortgages	\$
3. Other securities4. Notes receivable		(Schedule C) 11. Other liabilities (Schedule G)	
(Schedule B) 5. Real estate (Schedule C)		TOTAL LIABILITIES 12. Net worth (Total assets less total liabilities)	
6. Proprietary interests (Schedule D)7. Other assets (Schedule E)		less total habilities)	
TOTAL ASSETS	<u></u>	TOTAL LIABILITIES AND NET WORTH	\$
TOTAL ASSETS	φ	NEI WORIII	φ

CONTINGENT LIABILITIES

In addition to the liabilities listed above, have you	endorsed	, guaranteed, o	or become otherwis	e indirectly	or contingently	liable for	the debts
of others or through a pending lawsuit? \square Yes	□ No	If "yes," c	omplete the follow	ing:			

Name and address of Debtor/Obligor	Name and address of Creditor/Obligee	Description and Value of Collateral	Date Due	Current Amount
TOTAL				\$

SUPPORTING SCHEDULES

Schedules must agree in total with the appropriate item contained in the Financial Statement on page 5 of this report.

Schedule A – Marketable Securities

Indicate all debt and equity securities listed on an exchange or otherwise regularly traded in an open market. Separate debt and equity securities. Securities of closely held corporations should be listed on Schedule D--Proprietary Interests. The description should include the name of the issuer; the principal amount or number of shares held; and the interest rate, if applicable. Small holdings may be aggregated and shown as "other" provided that they account for no more than 10% of marketable securities.

Description	Market Value
	\$
TOTAL (carry forward to item 2)	\$

Schedule B - Notes Receivable

The description should include the name of the obligor; the note's maturity and terms of repayment; and a description of any collateral. If the note is payable to you and others jointly, indicate only your beneficial interest under Current Balance.

Description	Current Balance
	\$
TOTAL (carry forward to item 4)	\$

Schedule C - Real Estate and Related Loans

List all real estate in which you hold a beneficial interest. Submit year-end financial statements, including profit and loss statements, for the last two years for each investment (exclude residence) in which you have an interest equal to 10% or more of your net worth. Also submit a cash flow statement on any investment property valued at greater than 10% of net worth.

Description and Location (City and State)	Owner of Property	% Owner- ship	Mortgage Holder	Maturity Date	Current Market Value*	Current Balance**
					\$	\$
TOTAL	\$	\$				

 ^{*} Carry TOTAL forward to item 5

Schedule D – Proprietary Interests

List all business enterprises in which you hold a beneficial interest. The term "business enterprise" includes a corporation, association, partnership, business trust, sole proprietorship, or other business, the shares of which are not listed on a securities exchange or otherwise regularly traded. Under "Legal Form of Business," state the legal form of the business (corporation, joint venture, etc.) (Submit year-end financial statements, including profit and loss and cash flow statements, for the last two years for each business interest in which you have an interest equal to 10% or more of your net worth).

Name and Address of Business	Legal Form of Business	Nature of Business	% Ownership	Current Value	
				\$	
TOTAL (carry forward to item 6)					

^{**} Carry TOTAL forward to item 10

Schedule E - Other Assets

If any one asset amounts to 10% or more of net worth, briefly describe the asset. Include accounts receivable, merchandise and inventory at lower of cost or market value, machinery and equipment (less depreciation), life insurance at its cash surrender value, retirement funds (IRA, Keogh, etc.)

Description	Basis for Valuation	Current Value
		\$
TOTAL (carry forward to item 7)		\$

Schedule F - Notes Payable and Other Loans

Indicate all loans or notes payable other than real estate mortgages listed in Schedule C. Loan origination information must include the original date, loan amount, and co-makers, if any, and their percent obligation. Small obligations may be aggregated and shown as "other" provided that they account for no more than 20% of other loans and notes payable. Indicate any debt that is contractually delinquent by an asterisk next to the current balance.

Name and Address of Creditor and Loan Origination Information	Description and Value of Collateral	Maturity Date	Current Balance
			\$
TOTAL (carry forward to item 9)			\$

Schedule G - Other Liabilities

If any one liability amounts to 10% or more of net worth, briefly describe it. Include interest and taxes due and unpaid, other debts accrued and other liabilities.

Payable To	Description	Maturity Date	Current Balance
			\$
TOTAL (carry forward to item 11)			\$

Cash Flow Statement*

Sources of Cash	19	19	Year to Date	Projected Next Year 19
Salaries, wages, commissions, or other employment income	\$	\$	\$	\$
Rents, royalties, and investments				
Income from dividends and interest				
Other sources				
Total cash received				
Uses of Cash				
Personal living expenses (rent, household, etc.)				
Fixed obligations				
Income taxes				
Other uses				
Total cash outlay				
NET CASH FLOW (deficit)	\$	\$	\$	\$

^{*}Discuss any significant changes and itemize any items amounting to 10% or more of total income on a separate page, including insurance payments. Fixed obligations include bank loans, other loans, amortization and other debt servicing, and non-loan expenses for real estate investments. Any loan proceeds and debt service associated with this transaction should be included in projections for "Other" sources and uses.

Privacy Act Notice

A copy of this document is provided to the appropriate regulatory agency as required under various statutes and implementing regulation(s). To the extent that it contains personal and financial information about persons, the information may be subject to the Privacy Act of 1974 (5 U.S.C. § 552a) which provides safeguards for personal information. The appropriate regulatory agency may, at its discretion, disclose any or all of the information obtained concerning you to other regulatory agencies or other law enforcement or governmental agencies, in connection with the investigation of a possible violation of any federal or state statute or when such release is determined to be in the best interest of the appropriate regulatory agency and consistent with the public interest and applicable law. The appropriate regulatory agency may obtain information about you from any and all sources without limitation. These documents are considered confidential and generally are exempt from public disclosure under the authority of 5 U.S.C. § 552, relating to a personnel, medical, or similar record, including a financial record, or any portion thereof, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

CERTIFICATION

I understand that the appropriate regulatory agency may conduct extensive checks into my background, experience, and related matters in conjunction with my application or filing. I certify that the information contained in the biographical report and/or financial report has been carefully examined by me and is true, correct, and complete. I acknowledge that any misrepresentation or omission of a material fact, with respect to the foregoing, constitutes fraud in the inducement and may subject me to legal sanctions provided by 18 U.S.C. §§ 1001 and 1007.

Signed this day of	,
	Signature
Print or type name	Print or type name
Title (if applicable)	Title (if applicable)

^{*} If a joint financial statement is being submitted, both parties should complete the "Certification."